

RT 16/9/24

10 AM



Child: KAVIN S

3 Male / MHM202406916

13/09/2024 / IPM2024000820

Dr. DHANASEKHAR K

NG CARD

MH/ PRINT / 0007 / BILL / FO

Patient Name

D.O.A. 13/9/24 Time 6.00 PM

IP No.

Room No. 302

Rent Per Day 4000/-

TRANSFER DETAILS

Date	Time	From	To	Sister Signature
13/9/24	7 PM	BR	302 / 4000 (302)	S/N Suresha

OPERATION THEATRE

Date :	OT No. :
Surgeon :	Start Time :
I Asst. Surgeon :	End Time :
II Asst. Surgeon :	Dis. Pack :
III Asst. Surgeon :	Diathermy :
Anaesthetist :	C-Arm :
OT Nurse :	Arthroscopy :
Name of Surgery :	Laproscopy :
	Sevoflurane / Isoflurane :
	Inj. Fentanyl :
	Others :

MONITOR

Date	Start	Date	Disconnect

INFUSION PUMP

Date	Start	Date	Disconnect

OXYGEN

Date	Start	Date	Disconnect

SYRINGE PUMP

Date	Start	Date	Disconnect

ALPHA BED / SCD PUMP

Date	Start	Date	Disconnect

VENTILATOR

Date	Start	Date	Disconnect

RADIOLOGY - ECG / ECHO / X-RAY / USG / CT / MRI / DRP / BIO-DOPPLER

13/9/24

CXR (6524)

CBG

CBG

Date

PHYSIOTHERAPY

NEBULIZER

NEBULIZER

OPERATION THEATRE	
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Anaesthetist :	C-Arm :
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Name of Surgery :	Laproscopy :
	Sevoflurane / Isoflurane :
	Inj. Fentanyl :
	Others :

[illegible]

1319104

CBC, CRP (6533)

Blood clots

CP (6534)

